

J1132 U PTE  02/28/02	UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))</small>	
	Attorney Docket No.	13202.00375
	<i>First Named Inventor or Application Identifier</i> DEBRA M. CAPPUCCI, ET AL.	
	Express Mail Label No.	

APPLICATION ELEMENTS

See M.P.E.P. chapter 600 concerning utility patent application contents.

1. <input checked="" type="checkbox"/> Fee Transmittal Form <small>(Submit an original, and a duplicate for fee processing)</small>	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
2. <input type="checkbox"/> Applicant claims small entity status. <small>See 37 C.F.R. § 1.27.</small>	8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small>
3. <input checked="" type="checkbox"/> Specification Total Pages <input type="text" value="20"/>	a. <input type="checkbox"/> Computer Readable Form (C.R.F.)
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. §113) Total Sheets <input type="text" value="4"/>	b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper
5. <input checked="" type="checkbox"/> Oath or Declaration Total Pages <input type="text" value="2"/>	c. <input type="checkbox"/> Statements verifying identity of above copies
a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. §1.63(d)) <small>(for continuation/divisional with Box 17 completed)</small>	
i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed Statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§1.63(d)(2) and 1.33(b).</small>	
6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 C.F.R. §1.76	

ADDRESS TO:

Commissioner for Patents
Box Patent Application
Washington, D.C. 20231

10/084359-02


ACCOMPANYING APPLICATION PARTS		
9. <input checked="" type="checkbox"/>	Assignment Papers (cover sheet & document(s))	
10. <input type="checkbox"/>	37 C.F.R. §3.73(b) Statement <small>(when there is an assignee)</small>	<input type="checkbox"/> Power of Attorney
11. <input type="checkbox"/>	English Translation Document (if applicable)	
12. <input type="checkbox"/>	Information Disclosure Statement (IDS)/PTO-1449	<input type="checkbox"/> Copies of IDS Citations
13. <input type="checkbox"/>	Preliminary Amendment	
14. <input checked="" type="checkbox"/>	Return Receipt Postcard (M.P.E.P. § 503) <small>(Should be specifically itemized)</small>	
15. <input type="checkbox"/>	Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small>	
16. <input type="checkbox"/>	Other: _____ _____ _____	

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

Continuation Divisional Continuation-in-part (CIP) of prior application No. / (See Appln. Data Sheet)
Prior application information: *Examiner:* *Group/Art Unit:*

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS

27160

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	<small>(Insert Customer No. or Attach bar code label here)</small>	or <input type="checkbox"/> Correspondence address below
<hr/>		
<hr/>		
NAME		
Address		
City	State	Zip Code
Country	Telephone	Fax

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 C.F.R. §1.16(c))	49-20 =	29	X \$ 18.00 =	\$ 522.00
	INDEPENDENT CLAIMS (37 C.F.R. §1.16(b))	3-3 =	0	X \$ 84.00 =	\$ 0.00
	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 C.F.R. §1.16(d))			\$280.00 =	\$ 0.00
				BASIC FEE (37 C.F.R. §1.16(a))	\$ 740.00
				Total of above Calculations =	\$ 1262.00
	Reduction by 50% for filing by small entity (Note 37 C.F.R. §§ 1.9, 1.27, 1.28).				\$ 0.00
				TOTAL =	\$ 1262.00

19. Small entity status

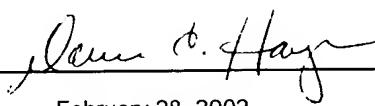
- a. A small entity statement is enclosed.
- b. A small entity statement was filed in the prior nonprovisional application and such status is still proper and desired.
- c. Is no longer claimed.

20. Please charge Deposit Account No. 50-1710 the amount of \$ 1,262.00 to cover the filing fee. A duplicate copy of the paper is attached.

21. Please charge Deposit Account No. 50-1710 the amount of \$ 40.00 to cover the recordal fee. A duplicate copy of the paper is attached.

22. The Commissioner is hereby authorized to charge the above fees or credit overpayments or charge any deficiencies to Deposit Account No. 50-1710:

- a. Fees required under 37 C.F.R. § 1.16.
- b. Fees required under 37 C.F.R. § 1.17.
- c. Fees required under 37 C.F.R. § 1.18.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED	
NAME	Dawn C. Hayes, Reg. No. 44,751
SIGNATURE	
DATE	February 28, 2002